

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		47	4/12/01
FORMALITY REVIEW	NK	989	5/3/01
RESPONSE FORMALITY REVIEW	CJ	875	8/15/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	12/16/00
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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H.S.  
 5-3-01  
 6/16/01  
 RSB  
 8/16/01